IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

Applicants : John UNDERWOOD et al.

Serial No. : 09/651,796

For : METHOD AND APPARATUS FOR
GENERATING A WEB SITE WITH DYNAMIC
CONTENT DATA FROM AN EXTERNAL DATA
SOURCE INTEGRATED THEREIN

Filed : August 30, 2000

Examiner : Ramy M. Osman

Art Unit : 2157

745 Fifth Avenue
New York, NY 10151

EXPRESS MAIL

Mailing Label Number: **EV 3450110589US**

Date of Deposit: February 27, 2004

I hereby certify that this paper or fee is being deposited with the United States Postal Service "Express Mail Post Office to Addressee" Service under 37 CFR 1.10 on the date indicated above and is addressed to the Commissioner of Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

__Saddam Ahmed__
(Typed or printed name of person mailing paper or fee)

_____
(Signature of person mailing paper or fee)

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MAR 0 8 2004

Technology Center 2100

AMENDMENT

Commissioner of Patents
P.O. Box 1450
Alexandria, VA 22313-1450

Dear Sir:

In response to the non-Final Office Action dated October 28, 2003, a one-month

extension of time being requested herein, please consider the following remarks.

03/04/2004 SSESHE1 00000048 09651796

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-1-   00174201

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Examiner	:	Ramy M. Osman
Art Unit	:	2157

745 Fifth Avenue
New York, New York 10151
Tel. (212) 588-0800

Commissioner for Patents
P.O. Box 1450
Alexandria, VA 22313-1450

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Sir:

Transmitted herewith is an amendment in the above-identified application. Technology Center 2100

X No additional fee is required.

___ The fee has been calculated as shown below.

X This is an application of a small entity under 37 CFR 1.9(f), and the amounts shown in parentheses apply.
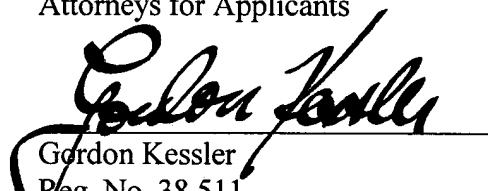
Claims as Amended

(1)	(2) Claims remaining after amendment	(3)	(4) Highest number previously paid for	(5) Present extra	(6) Rate	(7) Additional fee
Total claims	* 28	Minus	** = 28	* 0 x	$18 (9)	= $ 0
Independent claims	* 8	Minus	*** = 8	* 0 x	$86(43)	= $ 0
			Total additional fee for this amendment			$ 0

* If the entry in Column 2 is less than the entry in Column 4, write "0" in Column 5.
** If the highest number of total claims previously paid for is less than 20, write "20" in this space.
*** If the highest number of independent claims previously paid for is less than 3, write "3" in this space.

00178207

—   This application contains a multiple dependent claim. The required fee of $290(145) has been previously paid __, or is paid herewith __.

X   This response is being filed within the 1st month following the expiration of the term originally set therefor. This is a petition to request a 1-month extension of time. A check covering the cost of the petition is enclosed.

X   A check in the amount of **$55.00** is attached, which covers the cost of
__ additional claims **X** petition for extension of time.

—   Charge $__ to Deposit Account No. 50-0320.

X   Please charge any additional fees incurred by reason of this response or credit any overpayment to Deposit Account No. 50-0320.

Respectfully submitted,

FROMMER LAWRENCE & HAUG
LLP
Attorneys for Applicants

Gordon Kessler
Reg. No. 38,511
Tel. (212) 588-0800